



MISSOURI DEPARTMENT OF ELEMENTARY AND SECONDARY EDUCATION
DIVISION OF TEACHER QUALITY AND URBAN EDUCATION

8-014-522
(5-01)

APPLICATION FOR ROBERT C. BYRD HONORS SCHOLARSHIP
(FOR MISSOURI HIGH SCHOOL GRADUATES OR HOLDERS OF G.E.D. CERTIFICATES)

P.O. BOX 480
JEFFERSON CITY, MO 65102

INSTRUCTIONS ►

RETURN THIS APPLICATION TO THE ABOVE ADDRESS. APPLICATIONS MUST BE POSTMARKED BY APRIL 15.

TO BE COMPLETED BY APPLICANT

NAME	LAST	FIRST	M.I.	SOCIAL SECURITY NUMBER	
				— —	
HOME ADDRESS			CITY	STATE	ZIP
HOME TELEPHONE NUMBER ()			COUNTY	CONGRESSIONAL DISTRICT NUMBER OF RESIDENCE	

OPTIONAL — FOR DEMOGRAPHIC PURPOSES ONLY - IT WILL NOT BE USED FOR SELECTION.

ETHNIC ORIGIN (CHECK ONE)

- ☐ AMERICAN INDIAN
☐ ASIAN
☐ BLACK

- ☐ HISPANIC
☐ WHITE

SEX (CHECK ONE)

- ☐ FEMALE
☐ MALE

NOTE: ATTACH COPY OF HIGH SCHOOL TRANSCRIPT OR GED SCORE REPORT.

(CHECK ONE)

☐ DATE OF HIGH SCHOOL GRADUATION _____, 20 ____

NAME OF HIGH SCHOOL _____

ADDRESS OF HIGH SCHOOL _____
CITY STATE ZIP

TELEPHONE # _____

☐ I HAVE PASSED THE GENERAL EDUCATION DEVELOPMENT TEST (G.E.D.) ON _____, 20 ____

ARE YOU A U.S. CITIZEN OR NATIONAL? ☐ YES ☐ NO

APPLICANTS WHO ARE NOT U.S. CITIZENS MUST PROVIDE EVIDENCE FROM THE U.S. IMMIGRATION AND NATURALIZATION SERVICE THAT HE/SHE IS A PERMANENT RESIDENT OF THE UNITED STATES OR IS IN THE UNITED STATES FOR OTHER THAN A TEMPORARY PURPOSE WITH THE INTENTION OF BECOMING A CITIZEN OR PERMANENT RESIDENT. (PLEASE ATTACH PHOTOCOPIES.)

TO BE COMPLETED BY COUNSELOR

NOTE: ATTACH COPY OF HIGH SCHOOL TRANSCRIPT OR GED SCORE REPORT.

**DEPARTMENT USE
ONLY**

RANK/TOTAL NUMBER IN HIGH SCHOOL CLASS (7th SEMESTER) (Must be in top 10%) _____

AMERICAN COLLEGE TEST COMPOSITE SCORE (Must be above 90th percentile) _____

G.P.A. _____ (PLEASE COMPUTE G.P.A. ON A 4.0 SCALE)

ATTACH TEST LABELS HERE

SIGNATURE OF SCHOOL OFFICIAL/POSITION

(SIGNATURE)

(NAME TYPED OR PRINTED)

(POSITION)